Substitute for form 1449/PTO				Complete if Known		
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(Use as many sheets as necessary)				Examiner Name	Nora Maureen Rooney	
Sheet	1	of	1	Attorney Docket Number	025663-001201US	

U.S. PATENT DOCUMENTS						
Examiner Cite Initials* No.	Document Number Number Kind Code ^{2 (Flavous)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	r Cite Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	то	
		Country Code ³ Number ⁴	Kind Code ⁵ (if known)	MM-DD-TTTT		of Relevant rigules Appear	i.

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	AA	WILLIAM S. MOW, et al., Association of Antibody Responses to Microbial Antigens and Complications of Small Bowel Crohn's Disease; Gastroenterology 2004:126:414-424.	
	AB		
	AC		

Examiner Signature	/Nora Rooney/	Date Considered	04/27/2010

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